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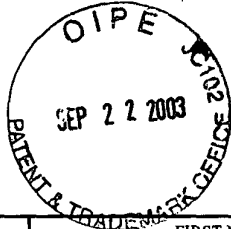
Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**
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20350 7590 07/03/2003

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Jo Ann Honcik Dallara (Depositor's name)
 [Signature] (Signature)
 September 16, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/747,391	12/20/2000	Robert Chow	20035000210	9579

TITLE OF INVENTION: HIGH THROUGHPUT METHODS OF HLA TYPING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO YES	\$1300 \$650	\$0	\$1300 \$650	10/03/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
SWITZER, JULIET CAROLINE	1634	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
 StemCyte, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)
 Arcadia, California

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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- ☐ Issue Fee
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- ☒ Advance Order - # of Copies 10

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Beth L. Kelly, Reg. 51,868 Sept. 16, 2003

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